MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
10/51●●26	
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1				51						
2				1			52						
3				1			53						
4				1			54						
5				1			55						
6				1			56						
7				1			57						
8				1			58						
9				1			59						
10				1			60						
11				1			61						
12			1				62						
13				1			63						
14				1			64						
15			1				65						
16				1			66						
17				1			67						
18				①			68						
19			1	①			69						
20				①			70						
21				①			71						
~~22~~							72						
~~23~~							73						
24				①			74						
25				1			75						
26				1			76						
27				1			77						
28				1			78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.		⬇	4	⬇		⬇	TOTAL IND.		⬇		⬇		⬇
TOTAL DEP.		⬅	22	⬅		⬅	TOTAL DEP.		⬅		⬅		⬅
TOTAL CLAIMS		▓	26	▓		▓	TOTAL CLAIMS		▓		▓		▓

PTO - 1360 (REV. 11/04)